

CASEFLOW REQUEST

JD-CV-116 Rev. 1-16

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.ct.gov

CSFLREQ

**Instructions**

1. Fill out all sections and file with the court.
2. File at least 3 days before the date of the scheduled event.

Note: If the request is granted, the court will try to schedule the event for the requested date. However, if that date is not available, it will be scheduled for the next available date.

Name of case (First-named plaintiff v. First-named defendant)

ST. JOHNS ROMAN CATHOLIC CHURCH OF STAMFORD CONNECTICUT V. CITY OF STAMFORD

Judicial District of

Stamford/Norwalk At Stamford

Date of request

05/22/2017

Date of scheduled event (if applicable)

Name of Judge who scheduled the event (if applicable)

Docket number

FST CV 17**- 6031653****(S)****Requested Action** ("X" box(es) that apply and give reason(s) for request below)

- ☐ Status Conference on or about: _____ Date _____
- ☐ Client/adjuster to be available by phone for _____ Event _____ scheduled on _____ Date _____
- ☐ Pretrial on or about _____ Date _____
- ☐ Party to be excused from _____ Event _____ scheduled on _____ Date _____
- ☒ Other: **Adjudication of Mt. for Judgment in Accordance with Stipulation (#101.00) at the Court's earliest convenience**

Reason(s) for request:

The parties jointly request that the Motion for Judgment in Accordance with Stipulation (#101.00) be adjudicated as soon as possible. The parties have resolved this dispute and ask that the Motion be granted immediately so that the parties can complete the transfer of the property in question. This is scheduled for a status conference on 7.26.17.

I agree to notify my client and all counsel of record and self-represented parties whether the requested action is granted or denied, and if granted, the specific ruling of the court. I have told all counsel and self-represented parties of record that I would be asking for the requested action. **All Counsel and Self-represented Parties:**

- ☒ Consent ☐ Do not consent to the action requested above

Signed (Person making request)

/s/ James V. Minor

Name of attorney and juris number or self-represented party (Print or type)

James v. Minor 060795

The person requesting the action is the:

- ☐ Plaintiff ☐ Defendant ☐ Attorney for Plaintiff ☒ Attorney for Defendant

Firm name (if applicable)

Stamford Corporation Counsel

Address

Municipal Office Building PO Box 10152

Telephone number (with area code)

(203)977-5158

I certify that a copy of the above was mailed or delivered on the date shown below to all counsel and self-represented parties of record. A sheet is attached listing the name and address of each party the copy was mailed or delivered to.

Signed (Individual attorney or self-represented party)

/s/ James V. Minor

Date

05/22/2017**Order**

Request is

- ☐ Granted ☐ Denied

Signed (Judge)

Date

ADA NOTICE

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at www.jud.ct.gov/ADA/

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